PTO/SB/05 (08-03)
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1 1991) 1995			Attorney Docket No. F		PAZ-205CP			
PATENT APPLICATION TRANSMITTAL		First I			tuart B. Levy			
		Title	t .		SING SUBSTITUTED COMPOUNDS TO MODULATE			
Only for new nonprovisional applications under 37 CFR 1.55(b))			ss Mail Label No.					
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.			MS Patent Application ADDRESS TO: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450					
2. Applicant claims See 37 CFR 1.2 3 X Specification (preferred arrange - Descriptive titl - Cross Referer - Statement Re; - Reference to: or a compute: - Background o - Brief Summan	[Total Pages] ement set forth below) le of the invention nce to Related Applications garding Fed sponsored R & D sequence listing, a table, r program listing appendix of the Invention y of the Invention ion of the Drawings (if filed) cription e Disclosure	1 1	8. Nucleotide a (if applicable a. Comput b. Specificat i. State ACC 9. Assignr 10. 37 CFR (when t. 11. English 12 Informa	e, all necessary) puter Readable I ion Sequence Li CD-ROM or CI ments verifying i OMPANYING ment Papers (cor a 3.73(b) Statem there is an assign Translation Doc tition Disclosure	oendix) od Sequition form (Costing of the cost of the	pence Submission CRF) n: copies); or ii. Paper of above copies ICATION PARTS et & document(s)) Power of Attorney (if applicable) Copies of IDS		
a. Newly executed (original or copy) b. Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed) i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. X Application Data Sheet. See 37 CFR 1.76 18. If a CONTINUING APPLICATION, check appropriate box, and suppl			Statement (IDS)/PTO-1449 Citations Preliminary Amendment 14. X Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. Certified Copy of Priority Document(s) (if foreign priority is claimed) Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. X Other: Postcard					
Specification following the title, or in an Application Data Sheet under 37 CFR 1.76: Continuation Divisional Continuation-in-part (CIP) of prior application No.: Prior application information: Examiner For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS								
X Customer Numb	oer: 0095		OR	Corre	sponde	ence address below		
Eliza	abeth A. Hanley							
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Name (Print/Type) Signature	Cynthia M. Sgroos	AM	Registration	No. (Attorney/Age		53,623 october 24, 2003		

Signature: _

(Cynthia M. Soroos)

CEE TO A NOMITTAL		Complete if Known						
│ FEE TRANSMITTAL		Application Number			er	Not Yet Assigned		
for FY 2004		Filing Date				Concurrently Herewith		
-		First Named Inventor			ntor	Stuart B. Levy		
Effective 10/01/2003, Patent fees are subject to annual revision.		Examiner Name				Not Yet Assigned		
Applicant claims small entity status. See 37 CFR 1.27		Art Unit			N/A		_	
TOTAL AMOUNT OF PAYMENT (\$) 1,708.00		Attorney Docket No.			5.	PAZ-205CP		
METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)						
Check Credit Money Order Other None X Deposit Account:	3. A	DDITIO	ONA	L FEES				
Deposit		Entity	_	all Entity	_			
Account Number 12-0080	Fee Code	Fee (\$)	Coc		•	Fee Desc	ription	Fee Paid
Deposit Control	1051	130	205	1 65	Surcharge	– late filing fe	e or oath	
Account Name Lahive & Cockfield, LLP	1052	50	205	•	-	_	onal filing fee or cover	-
The Director is authorized to: (check all that apply)	1002				sheet.			
X Charge fee(s) indicated below X Credit any overpayments	1053	130	105	3 130	Non-Englis	sh specification	n	
X Charge any additional fee(s) during the pendency of this application	1812	2,520	181	2 2,520	For filing a	request for ex p	parte reexamination	
Charge fee(s) indicated below, except for the filing fee	1804	920°	180	920*	Requesting Examiner	g publication o	of SIR prior to	
to the above-identified deposit account.	1805	1,840*	180	5 1,840°	Requestin	g publication o	of SIR after	
FEE CALCULATION	1251	110	225	51 55	Examiner : Extension	action for reply withir	n first month	
1. BASIC FILING FEE	1252	420	225	2 210			second month	
Large Entity Small Entity	1253	950	225	3 475	Extension	for reply within	third month	
Fee Fee Fee Fee Fee Paid Code (\$) Code (\$)	1254	1,480	225	4 740	Extension	for reply within	n fourth month	
1001 770 2001 385 Utility filing fee 770.00	1255	2,010	225	5 1,005	Extension	for reply within	n fifth month	
1002 340 2002 170 Design filing fee	1401	330	240	165	Notice of A	Appeal		
1003 530 2003 265 Plant filing fee	1402	330	240	165	Filing a bri	ef in support o	f an appeal	
1004 770 2004 385 Reissue filing fee	1403	290	240		•	or oral hearing		<u>. </u>
1005 160 2005 80 Provisional filing fee	1451 1452	1,510 110	145	-		revive – unav	lic use proceeding	
SUBTOTAL (1) (\$) 770.00	1452	1,330	245			revive - uninte		
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501	1,330	250			e fee (or reissu		1
Extra Fee from	1502	480	250		Design iss	•		
Claims below Fee Paid Total Claims 56 -20** = 36 x 18.00 = 648.00	1503	640	250		Plant issue			
Independent 3 -3** = x = 0.00	1460	130	146			o the Commiss	sioner	-
Claims 290.00 = 290.00	1807	50	180	7 50	Processing	g fee under 37	CFR 1.17(a)	!
	1806	180	180			-	on Disclosure Stmt	
Large Entity Small Entity Fee Fee	8021	40	802		Recording	each patent a	ssignment per	
Code (\$) Code (\$) Fee Description 1202 18 2202 9 Claims in excess of 20		17				imes number o	of properties) final rejection	
1202 18 2202 9 Claims in excess of 20 1201 86 2201 43 Independent claims in excess of 3	1809	770	280	9 385	(37 ČFR 1	.129(a))		
1203 290 2203 145 Multiple dependent claim, if not paid	1810	770	281	0 385		additional inver (37CFR 1.129		
1204 86 2204 43 ** Reissue independent claims	1801	770	280	1 385	Request fo	or Continued E	xamination (RCE)	•
over original patent 1205 18 2205 9 ** Reissue claims in excess of 20	1802	900	180	900		or expedited ex n application	kamination	
and over original patent	Other	her fee (specify)						
SUBTOTAL (2) (\$) 938.00 Reduced by Basic Filing Fee Paid					SUBTO	TAL (3) (\$)	0.00	
**or number previously paid, if greater, For Reissues, see above								
SUBMITTED BY						(Complete	(if applicable))	
Name (Print/Type) Cynthia Ni. Sorops		ration No ey/Agent)		53,623		Telephone	(617) 227-7400	
	1,110111	-Jungenil)						

I hereby certify that this corresponde US, in an envelope addressed to:	ence is being deposited with the	he U.S. Postal Se	ervice as Express Mail,	Airbill No. EV 309 881 380
US, in an envelope addressed to: Note the date shown below.	111	11//////	TAN -	

Dated: October 24, 2003

Signature

Signature:

(Cynthia M. Soroos)

October 24, 2003